

FEC  
FORM 1

# STATEMENT OF ORGANIZATION

RECEIVED  
2014 DEC 23 AM 11:55  
Office Use Only

1. NAME OF  
COMMITTEE (in full)



(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

FEC MAIL CENTER

Tom Wells, loving and obedient child of The LORD GOD of our fathers, OUR ONLY HOLY, ETERNAL, SUPREMEY COMPASSIONATE, ABSOLUTELY-PERFECT BELOVED LORD GOD of Abraham, the GOD of Isaac, and the GOD of Jacob; YOU ARE MY CREATOR, MY SAVIOR, the GIVER of all of my days, ETERNAL MY KING; CREATOR of the heavens and the Earth; CREATOR of all that is seen and of all that is unseen; CREATOR of all that is known and of all that is unknown, running for the office of the U.S. President.

% the Jewish Synagogue "The Only Holy, Eternal, Absolutely-Perfect, Raised Messiah's house of prayer to THE LORD GOD of our fathers, OUR ONLY HOLY, ETERNAL, SUPREMEY COMPASSIONATE, ABSOLUTELY-PERFECT BELOVED LORD GOD of Abraham, the GOD of Isaac, and the GOD of Jacob; YOU ARE MY CREATOR, MY SAVIOR, the GIVER of all of my days, ETERNAL MY KING; CREATOR of the heavens and the Earth; CREATOR of all that is seen and of all that is unseen; CREATOR of all that is known and of all that is unknown, and the Synagogue is presently located at 10 High Hill Street - Greenville, South Carolina 29605-2007 Cell Phone 864 - 320 - 3106.

[GREENVILLE

CITY ▲

[SC]

STATE ▲

[29605 2007

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address  
is changed)

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address  
is changed)

2. DATE

12

16

2014

3. FEC IDENTIFICATION NUMBER ►

C

4. IS THIS STATEMENT

N

NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Tom Wells

Signature of Treasurer

*Tom Wells*

Date

12

16

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

## 5. TYPE OF COMMITTEE

**Candidate Committee:**

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Thomas Baxter Wells

Candidate Party Affiliation

G O D

the full name of the  
G O D party is on the  
back side of this form

Office Sought:

☐

House

☐

Senate

☒

President

State

S C

District

(c) ☐

This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

**Party Committee:**

- (d) ☐ This committee is a  (National, State or subordinate) committee of the G O D (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Corporation             | <input type="checkbox"/> Corporation w/o Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association             | <input type="checkbox"/> Cooperative        |
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

**Committees Participating in Joint Fundraiser**

- |    |                      |               |                        |
|----|----------------------|---------------|------------------------|
| 1. | <input type="text"/> | FEC ID number | <input type="text"/> C |
| 2. | <input type="text"/> | FEC ID number | <input type="text"/> C |
| 3. | <input type="text"/> | FEC ID number | <input type="text"/> C |
| 4. | <input type="text"/> | FEC ID number | <input type="text"/> C |

Write or Type Committee Name

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

## 7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Thomas Baxter Wells, candidate

% the Jewish Synagogue "The Only Holy, Eternal, Absolutely-Perfect, Raised Messiah's house of prayer to THE LORD GOD of our fathers, OUR ONLY HOLY, ETERNAL, SUPREMEY COMPASSIONATE, ABSOLUTELY-PERFECT BELOVED LORD GOD of Abraham, the GOD of Isaac, and the GOD of Jacob; YOU ARE MY CREATOR, MY SAVIOR, the GIVER of all of my days, ETERNAL MY KING; CREATOR of the heavens and the Earth; CREATOR of all that is seen and of all that is unseen; CREATOR of all that is known and of all that is unknown, and the Synagogue is presently located at 10 High Hill Street - Greenville, South Carolina 29605-2007 Cell Phone 864 - 320 - 3106.

Title or Position

Greenville

S. C. :

29605-2007

Candidate

Telephone number |864|-|320-|3106|

## 8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name  
of Treasurer

Thomas Baxter Wells

% the Jewish Synagogue "The Only Holy, Eternal, Absolutely-Perfect, Raised Messiah's house of prayer to THE LORD GOD of our fathers, OUR ONLY HOLY, ETERNAL, SUPREMEY COMPASSIONATE, ABSOLUTELY-PERFECT BELOVED LORD GOD of Abraham, the GOD of Isaac, and the GOD of Jacob; YOU ARE MY CREATOR, MY SAVIOR, the GIVER of all of my days, ETERNAL MY KING; CREATOR of the heavens and the Earth; CREATOR of all that is seen and of all that is unseen; CREATOR of all that is known and of all that is unknown, and the Synagogue is presently located at 10 High Hill Street - Greenville, South Carolina 29605-2007 Cell Phone 864 - 320 - 3106.

CITY

STATE

ZIP CODE

Title or Position

Candidate

a cell phone |864|-|320|-|3106|

Full Name of  
Designated  
Agent

Mailing Address

Title or Position

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

**A very important message to The Federal Election Commission**

According to present Federal regulations I am unable to open any kind of a bank account unless I intentionally desecrate a basic tenet of my Jewish faith, and I will not intentionally desecrate any of the basic tenets of my Jewish faith. I need the FEC to issue an order for Federal Banks to recognize my Federal ID card issued to me from the Department of Veterans Affairs that has my picture on it as an acceptable form of picture ID, or the FEC needs to have the Federal Government to issue me a United States Passport for free so that I can follow my written guaranteed rights as a natural born American citizen, and as a disabled service connected American, Vietnam area Veteran to run for public office.

Name of Bank, Depository, etc.

Mailing Address

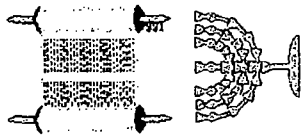
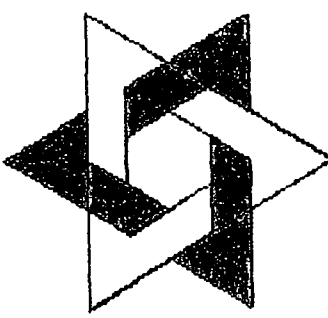
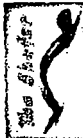
CITY

STATE

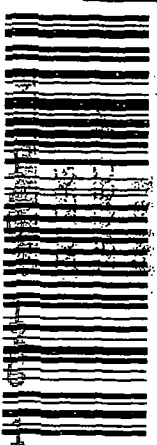
ZIP CODE

the Jewish synagogue. The only word, LORD, is used in the prayer to The LORD GOD of our fathers OUR ONLY HOLY, ETERNAL, SUPREME COMPASSIONATE, ABSOLUTE PERFECT, BELOVED LORD GOD of Abraham, The GOI Isaac, and the GOD of Jacob; YOU ARE MY CREATOR, MY SAVIO the GIVER of all of my days, ETERNAL MY KING; CREATOR of the heavens and the Earth; CREATOR of all that is seen and of all that is unseen; CREATOR of all that is known and of all that is unknown Cell Phone 864-320-3106

S Y N A G O G U E  
 10 High Hill Street • Greenville, South Carolina • 29605 - 2007  
 Sh'ma Yisrael ADONAI ELOHEINU ADONAI EHAD.



Hear, O Israel: The LORD our GOD, The LORD is ONE.

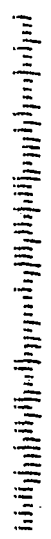


7013 0600 0000 4074 5395




To: Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463

20463



Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 12/16/14
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER (8/2013)	12/23/14 DATE PREPARED